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Transmittal Letter - (Original & 1 copy)
Notice of Appeal - (Original & 1 copy)



Case Name: Fulcomer 5-3
Serial No.: 09/240,932

1250-245

May 7, 2004 KMM



Ryan, Mason & Lewis, LLP
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Fulcomer 5-3

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application

Applicants(s): Fulcomer et al.
Case: 5-3
Serial No.: 09/240,932
Filing Date: January 29, 1999
Group: 2663
Examiner: Chi Ho A. Lee

I hereby certify that this paper is being deposited on this date with the U.S. Postal Service as first class mail addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450
Signature: Bobbie A. Blum Date: February 17, 2005

Title: Application Module Interface for Bidirectional Signaling and Bearer Channels in a Private Branch Exchange (PBX) Environment

TRANSMITTAL OF SUPPLEMENTAL APPEAL BRIEF

Mail Stop Appeal Brief - Patents
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are the following documents relating to the above-identified patent application:

- (1) Supplemental Appeal Brief;
- (2) Request to Reinstate Appeal; and
- (2) Copy of Notice of Appeal, filed on May 7, 2004, with copy of stamped return postcard indicating receipt of Notice by PTO on May 10, 2004.

There is an additional fee of \$500 due in conjunction with this submission under 37 CFR §1.17(c). Please charge **Avaya Inc. Deposit Account No. 50-1602** the amount of \$500, to cover this fee. In the event of non-payment or improper payment of a required fee, the Commissioner is authorized to charge or to credit **Avaya Inc. Deposit Account No. 50-1602** as required to correct the error. A duplicate copy of this letter and two copies of the Appeal Brief are enclosed.

Respectfully,

Kevin M. Mason

Date: February 17, 2005

Kevin M. Mason
Attorney for Applicant(s)
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**NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

Fulcomer 5-3

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Assistant Commissioner for Patents, Washington D.C. 20231" on May 7, 2004

Signature

Typed or printed

name

Linda M. Shackleton

In re Application of

Fulcomer et al.

Application Number

09/240,932

Filed

January 29, 1999

For

Application Module Interface for Bidirectional Signaling and Bearer Channels in a Private Branch Exchange (PBX) Environment

Group Art Unit

2663

Examiner

Chi Ho A. Lee

Applicant hereby **appeals** to the Board of Patent Appeals and Interferences from the last decision of the examiner.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 320.00

- ☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$_____
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.
- ☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-1602. I have enclosed a duplicate copy of this sheet.
- ☐ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

- ☐ applicant/inventor.
- ☐ assignee of record of the entire interest.
See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
- ☒ attorney or agent of record.
- ☐ attorney or agent acting under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a): _____

Kevin M. Mason
Signature

Kevin M. Mason
Typed or printed name

May 7, 2004
(Date)

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.